

Asthma Health Care Quality Improvement



PROGRAM DESCRIPTION

The Montana Asthma Control Program offers quality improvement (QI) programs for both hospitals and clinics providing care and education to asthma patients.

The goals of this program are to:

- Improve health outcomes for the 90,000+ Montanans with asthma;
- Increase access to quality asthma care and self-management education; and
- Reduce overall asthma-related health care costs over time.

PROGRAM BENEFITS

Participating facilities receive the following:

- A grant to be used in a year toward providing guidelines-based asthma services;
- Support from professionals in utilizing their EHR software;
- Potential for an extension of the grant after the end of the first year;
- Ongoing educational opportunities, resources, and support;
- Onsite educational presentation(s) approved for continuing education credits;
- Pre- and post-implementation chart review to provide site-specific feedback; and
- Materials from the MACP to be used in patient education and support quality patient care.

MACP staff offer education on the following topics:

- Conducting and billing for spirometry;
- Long-term asthma management; and
- Treating an asthma exacerbation.

Data provided through this program could support various quality improvement programs, such as Meaningful Use and Patient Centered Medical Home, and impact collection of UDS and HEDIS measures.

ASTHMA IN MONTANA

Asthma hospitalizations are preventable, but in 2012, \$4.7 million in charges were billed for asthma-related hospitalizations in Montana (HDD, 2012). Only 40% of Montana adults and 56% of children with asthma reported having received at least 3 of the 5 recommended pieces of asthma self-management education (ACBS 2006-2010).

RESOURCES

Visit this website for more information:

<http://dphhs.mt.gov/asthma>

Health Care Focus

Asthma

Target Audience

- Hospital emergency department staff
- Primary care providers

Continuing Education

Yes, varies per presentation

Cost

Free

Dates

Ongoing

CONTACT

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